IAP15 Rec'd PCT/PTO

PTO/SB/17 (07-06)
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didet the reported treatment of the person are required to				Complete if Known				
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Number 1		10/565,218-Conf. #9791		
FEE TRANSMITTAL				Filing Date		January 20, 2006		
				First Named Inventor An		Amanda Jane CHALMERS		
For FY 2006				Examiner Name Not Yet As		Not Yet Assign	ned	
Applicant claims small entity status. See 37 CFR 1.27				Art Unit N/A				
TOTAL AMOUNT OF PAYMENT (\$) 1,590.00				Attomey Docket No. 0446-0185PUS1			S1	
METHOD OF PAYMENT (check all that apply)								
X Check Credit Card Money Order None Other (please identify):								
Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17								
FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
	FI	LING FEES	SE	ARCH FEES	EXAMI	NATION FEES		
Application Ty	pe Fee (\$	Small Entity) Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
		100	v	ŭ	v	v		Small Entity
2. EXCESS CLAIM FEES Fee Description Small Entity Fee (\$)								
Each claim over 20 (including Reissues)								25
Each independent claim over 3 (including Reissues)								100
Multiple dependent claims 360 180								
Total Claims Extra Claims Fee (\$) Fee I				Paid (\$)	Multiple Dependent Claims			
	- =	x = _			F	ee (\$)	Fee Paid (\$	1
HP = highest number of total claims paid for, if greater than 20.								
Indep. Claims	Extra Claims	Fee (\$)	Fee	Paid (\$)				
	·	× = _						
HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
- 100 = /50 (round up to a whole number) x =								
4. OTHER FEE(\$)								
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): 1254 Extension for response within fourth month 1,590.00								
SUBMITTED BY O OO O								
Signature Registration No. 21,044 Telephone 703-205-8000								-8000
						Date 12-4-2006		
Name (Print/Type) Raymond C. Stewart Date /2-4-2004								